



FIRST THINGS FIRST

The right system for bright futures

Request for Grant Application Amendment #1

Request for Grant Application No.: FTF-RC013-13-0365-00
Request for Grant Application Title: Care Coordination/Medical Home
Central Phoenix Regional Partnership Council
RFGA Release Date: February 1, 2012
Issuing Agency: Arizona Early Childhood Development and Health Board,
First Things First
Due Date: March 16, 2012
Receipt/Opening Location: First Things First
4000 N Central Avenue, Suite 800, Phoenix, AZ 85012
Contact: grants@azftf.gov
Fax (602) 265-0009

A SIGNED COPY OF THIS AMENDMENT SHALL BE RECEIVED AT THE ABOVE AGENCY LOCATION (PREFERRABLY WITH THE SOLICITATION RESPONSE) PRIOR TO THE DUE DATE AND TIME. IT IS NECESSARY TO RETURN THIS FORM ONLY IF YOU ARE RESPONDING TO THE SOLICITATION. THIS SOLICITATION IS AMENDED AS FOLLOWS:

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Reads

This is a twelve (12) month contract for the fiscal year ending June 30, 2013 with an option for renewal for two (2) additional twelve (12) month periods. Total funds available are approximately \$1,000,000 for the first funding period. First Things First reserves the right not to award the entire amount of available funds or to award an amount that is greater than the posted available funds. Renewal will be contingent upon satisfactory contract performance, evaluation and availability of funds. Multiple Awards are anticipated to be made, with an estimated average award of \$100,000.

Should Read

This is a twelve (12) month contract for the fiscal year ending June 30, 2013 with an option for renewal for two (2) additional twelve (12) month periods. Total funds available are approximately \$1,000,000 for the first funding period. First Things First reserves the right not to award the entire amount of available funds or to award an amount that is greater than the posted available funds. Renewal will be contingent upon satisfactory contract performance, evaluation and availability of funds. Multiple awards are anticipated to be made.

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Reads

FTF is seeking successful applicants to implement this strategy and work collectively with FTF to impact the school readiness indicators below:

- % of children with newly identified developmental delays during the kindergarten year
- #/% of children ages 2-5 at a healthy weight (Body Mass Index-BMI)
- #/% of children receiving timely well child visits

Should Read

FTF is seeking successful applicants to implement this strategy and work collectively with FTF to impact the school readiness indicator below:

- #/% of children receiving timely well child visits

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Reads

- 3) Adhere to the care coordination models that lead to more children 0-5 having a medical home.

Should Read

- 3) Adhere to the care coordination models that lead to more children 0-5 having a medical home. Medical home is defined as:
A model of delivering primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate and culturally effective. Critical pediatric medical home principles: 1) family-centered partnerships that are trusting, collaborative, working partnerships with families that respect diversity and recognize that families are the constant in a child's life; 2) community-based system with a family centered- coordinated network designed to promote the healthy development and well-being of children and their families; 3) transitions where the provision of high-quality, developmentally appropriate, health care services continues uninterrupted as the individual moves along and within systems of services, and from adolescence to adulthood; and 4) value as demonstrated by the requirement that a high-performance health care system have appropriate financing to support and sustain medical homes that promote system-wide quality care with optimal health outcomes, family satisfaction and cost efficiency (American Academy of Pediatrics).

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Reads

In order to address these issues and in collaboration with First Things First's goal to build on current efforts to collaborate to improve children's access to quality health care, and build on current efforts to increase the number of health care providers utilizing a medical home model.

Should Read

In order to improve a child's access to quality health care, it is expected that the care coordination model will collaborate with health care providers and other First Things First's grantees to build a system of coordinated services.

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Reads

4. **Community based programs** that assist families with children who have complex medical and health care needs to access needed care are included in this strategy to accommodate regional difference.

Should Read

4. **Community based programs** that assist families with children who have complex medical and health care needs to access needed care. Included in this strategy are adaptations of the first three models that are specific to regional preference, capacity and needs. Justification for adaptations should be included.

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Reads

Elements common to each program should include the following:

- Routine and ongoing developmental screening
- Parental guidance and education
- Well child visits with immunizations
- Support continuity of care for parents and their children
- Interaction with more than one agencies
- Develop a care plan with the family- parental
- Ongoing evaluation of efforts at reaching the targeted population.

Should Read

Elements common to each program should include the following:

- Routine and ongoing developmental screening
- Parental guidance and education
- Support use of well child visits with immunizations
- Support continuity of care for parents and their children
- Interaction with more than one health provider and/or agency to coordinate services
- Develop an individualized care plan with the family
- Provide ongoing evaluation of efforts at reaching the targeted population

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Reads

Unit of Service:

- TSU dependent upon regional funding plans is no less than 1000 children and their families.

Should Read

Unit of Service

- The Target Service Unit (TSU) is 1000 children served for the \$1,000,000 in available funding. If serving less than the TSU, the amount of funding requested should be proportional.

Reads

Performance Measures:

- Total number of medical practices/clinics participating in care coordination(proposed service number per contract)
- Percentage of children referred for early intervention/actual service number
- Percentage of medical care professionals conducting routine and ongoing developmental screening (in clinic settings OR during home visits)
- Total number of children screened to determine those who require care coordination services.
- Number of children receiving care coordination receiving well child visits/target service number
- Number of children receiving care coordination by type of health insurance- uninsured, Medicaid, Medicare, Kids Care, IHS insurance, Military insurance, commercial insurance)
- Percentage of families reported satisfaction with provided care coordination/strategic target

Should Read

For **Care Coordination/Medical Home**, the performance measures are:

Number of children served/ proposed service number

Number of written care plans completed

Number of families receiving referrals for health insurance enrollment

Number of referrals for health and human service providers

A narrative report should include the following:

- Total number of medical practices/clinics participating in care coordination
- Description of the assessment, screening and referral process for children with developmental delays.
- Number of children receiving care coordination by type of health insurance- (uninsured, Medicaid, Medicare, Kids Care, IHS insurance, Military insurance, commercial insurance)
- Percentage of families reported satisfaction with provided care coordination/strategic target

ALL OTHER PROVISIONS OF THE SOLICITATION SHALL REMAIN IN THEIR ENTIRETY.

**APPLICANT HEREBY ACKNOWLEDGES RECEIPT
AND UNDERSTANDING OF THE ABOVE
AMENDMENT.**

THE ABOVE REFERENCED SOLICITATION
AMENDMENT IS ISSUED THIS DATE
Friday, February 17, 2012

Signature

Date

Kathy Rice
Finance Specialist

Typed Name & Title